

EXHIBIT D

Declaration of Omar Gonzalez-Pagan in support of
Motion to Exclude Expert Testimony of Dr. Paul W. Hruz
Kadel v. Folwell, No. 1:19-cv-00272-LCB-LPA (M.D.N.C.)

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**Exhibit
0003**
9/29/2021
Hruz

1 I N D E X

2 PAGE

3 QUESTIONS BY:

4 Ms. Cooper 5

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7 E X H I B I T S

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9 EXHIBIT DESCRIPTION PAGE

10 Exhibit 1 Dr. Hruz Expert Declaration 40

11 Exhibit 2 Cross Sex Steroids Article 51

12 Exhibit 3 International Conference/Madrid Document 56

13 Exhibit 4 About The National Catholic Bioethics
14 Quarterly 69

15 Exhibit 5 Declaration of Dr. Spack 84

16 Exhibit 6 Endocrine Treatment of Gender Dysphoria;
17 Clinical Practice Guideline 223

18 Exhibit 7 Expert Declaration of Dr. Paul Hruz
19 - Adams Case 262

20 Exhibit 8 National Catholic Certification Program
21 in Health Care Ethics 293

22 (Original exhibits retained by the court reporter to
23 be copied and attached to the transcript.)

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Deposition of DR. PAUL W. HRUZ, M.D.,
Ph.D., produced, sworn and examined on the 16th
Day of July, 2018 between the hours of 9:00 a.m.
and 5:00 p.m. at the offices of Alaris Litigation
Services, 711 N. 11th Street, in the City of St.
Louis, State of Missouri, before Rebecca Brewer,
Registered Professional Reporter, Certified
Realtime Reporter, Missouri Certified Shorthand
Reporter, and Notary Public within and for the
State of Missouri.

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1 clarify what you mean by formal education.

2 **Q Well, I'll ask broadly; any kind of**
3 **training of any sort that a doctor would get in the**
4 **course of, you know, either their initial medical**
5 **education or continuing education.**

6 A So, working at a major academic
7 institution, we're actually charged with providing
8 medical education and so, to the extent that we've
9 held journal clubs that we've had presentations with
10 my colleagues where we've discussed the scientific
11 evidence, where we've gone formally through the DSM
12 Guidelines, where we've gone through the Endocrine
13 Society Guidelines, that has been done at my
14 institution. Have I sought out and gone to a
15 separate conference related to gender dysphoria?
16 The answer is no.

17 **Q But, at your own institution, you've**
18 **participated in these interactions, these journal**
19 **clubs and other activities that address gender**
20 **dysphoria and the treatment for gender dysphoria?**

21 A That is a standard -- that is one of the
22 components of what we do for all the conditions that
23 endocrinologists are engaged in.

24 **Q Okay. Have you conducted any research**
25 **related to gender dysphoria or the treatment of**

1 **gender dysphoria?**

2 A No formal trials, no.

3 **Q Any other research?**

4 A I've been in the area of HIV research for
5 20 years and conducted a number of scientific
6 studies that -- but not directly related to gender
7 dysphoria.

8 **Q Yeah, I'm sorry if I was unclear. I**
9 **didn't -- I know you've done research, but in the**
10 **area of gender dysphoria, no research, is that**
11 **right?**

12 A I have not done any -- I'm not a clinical
13 trials physician scientist. I'm a bench scientist.

14 **Q What does that mean?**

15 A I conduct laboratory research, so I'm
16 engaged in hypothesis-driven research.

17 **Q Okay. So, talking about research broadly,**
18 **you haven't conducted any form of research relating**
19 **to gender dysphoria, is that right?**

20 A No, I have. I would consider research in
21 looking at the extensive literature that's there is
22 research. It's not a randomized controlled trial,
23 it's not a formal study, but that would fit within
24 the domain of research.

25 **Q You mean reviewing research that was**

1 **published by other people? Is that what you mean?**

2 A So, again, we can define research in many
3 different ways. If you're asking the question about
4 research, about gathering information, about the
5 evidence that's available, I've done a considerable
6 amount of research and that has consisted of looking
7 at what published data is available supporting the
8 recommendations that are being made. That I would
9 consider research, but it is not a clinical trial.

10 **Q Okay. And what people might call studies,**
11 **scientific studies, have you done any scientific**
12 **studies?**

13 A Again, how you define studies, again, I
14 have not done clinical trials.

15 **Q Okay. When you were deposed in the Adams**
16 **case, November, I believe it was, last year, you**
17 **mentioned you were in the process of responding to a**
18 **research funding announcement by the NIH to do**
19 **research related to gender dysphoria or gender**
20 **identity issues. Did I get that right?**

21 A Yes.

22 **Q Can you tell me the status of that?**

23 A Yes. There are a number of logistical
24 issues that are needing to be worked out. There is
25 no funding for that particular study going on,

1 recruiting the people that are going to be necessary
2 to conduct that study, again, I'm a pediatric
3 endocrinologist. And to my knowledge, you know,
4 that hasn't moved much beyond the initial planning
5 stages. The proposal itself was a suggestion to
6 address the question of -- a very particular
7 question of the effects of pubertal blockade on the
8 trajectory as far as the number of individuals that
9 went on to cross hormone therapy and those that did
10 not.

11 **Q So, did you ever submit a proposal to NIH**
12 **to do this research?**

13 **A** No.

14 **Q Okay. Did you ever respond to the funding**
15 **announcement in any way?**

16 **A** Depends on how you say "respond." I've
17 already said I did not submit a proposal. I have
18 taken that to colleagues. In fact, I've had very
19 recent discussions with my colleague at Washington
20 University that is interested in starting some sort
21 of research effort. And I could speak at length of
22 what I've recommended to him as far as how these
23 studies should be conducted. I've been very
24 disappointed that the rigor -- scientific rigor
25 that's necessary for those studies is not currently

1 realignment of gender identity with sex that occurs
2 when people do not get pubertal blockade, to the
3 results of that particular -- again, it was a very
4 small study -- would lead to that being asked as a
5 hypothesis as to whether that intervention itself
6 might have been influencing the outcome.

7 **Q So, just to make sure I'm clear, it is**
8 **still just a hypothesis that pubertal blockade could**
9 **lead to persistence? That's not been proven?**

10 A That is correct. And the opposite has not
11 been proven as well.

12 **Q I understand. Okay. Let's take your**
13 **report from this case. Actually, before we turn to**
14 **that, I forgot to ask one other question. Do you**
15 **have experience conducting clinical trials on any**
16 **topic?**

17 A I've only been involved in one clinical
18 trial. It's a very small study and my role was very
19 minor.

20 **Q And what was that topic?**

21 A It was on the influence of insulin
22 sensitivity on cardiac function.

23 **Q I see. So clinical trials isn't your area**
24 **of expertise?**

25 A That is correct.

1 **the meeting was?**

2 A He was trying to convene a meeting so we
3 could discuss the issues related to gender
4 dysphoria. There was -- they were searching for
5 somebody from the endocrine field that would be
6 willing to talk over the issues that I had expertise
7 in, that I had developed my understanding of what
8 the literature showed, and he specifically said,
9 You've got expertise in this area and we'd like to
10 learn.

11 **Q And did they talk about a need to develop**
12 **expert witnesses for litigation?**

13 A You know, I think that was implicit. I
14 don't think that was -- I mean, I was not surprised
15 when I was asked to serve as an expert. I'd
16 actually submitted a declaration prior to that
17 meeting. And I'm not sure exactly how that -- any
18 of the details how I was asked to do that, but so I
19 had already done some of the work there, so I made
20 the assumption that that was one of the reasons why
21 he invited me down.

22 **Q Okay. So, the folks there were people who**
23 **would potentially be expert witnesses in litigation?**

24 A Not everyone that was there. I think
25 there were people that explicitly said, I'm not